PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE aperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/726,883 Filing Date TRANSMITTAL December 3, 2003 **FORM** First Named Inventor Jack S. Rosen Art Unit 3749 **Examiner Name** Josiah C. Cocks (to be used for all correspondence after initial filing) Attorney Docket Number KH0694US (#90636) 25

Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)								
		ENCLOSURES (Check a	ill that apply					
X	Fee Transmittal Form	Drawing(s)		After Allowance Communication to TC				
	X Fee Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences				
Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): return postcard receipt				
	SIGNA	TURE OF APPLICANT, ATT	ORNEY, C	OR AGENT				
Firm Name D. Peter Hochberg Co., L.P.A.								
Signat	Signature							
Printe	D. Peter Hochberg		•					
Date april 1, 20		005	Reg. No.	24,603				
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Effective pr/12/08/2004.			
Fees pursuan 8 ine Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	10/726,883	
FEE TRANSMITTAL	Filing Date	December 3, 2003	
For FY 2005		Jack S. Rosen	
V	Examiner Name	Josiah C. Cocks	
X Applicant claims small entity status. See 37 CFR 1.27	Art Unit	3749	
TOTAL AMOUNT OF PAYMENT (\$) 160.00	Attorney Docket No.	KH0694US (#90636)	

(i) Attorney Booket No. [K11009403 (#90030)	_							
METHOD OF PAYMENT (check all that apply)								
Check X Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number: 08-2441 Deposit Account Name: D. Peter Hochberg Co., L.P.A. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee X Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$)								
Application Type Fee (\$) Utility 300 150 500 250 200 100 0.00								
Design 200 100 100 50 130 65								
Plant 200 100 300 150 160 80								
Reissue 300 150 500 250 600 300								
Provisional 200 100 0 0 0								
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) A - 3 or HP = 1 x 100.00 = 100.00 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee (\$) Fee (\$) Fee Paid (\$) Sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee (\$) Fee Paid (
4. OTHER FEE(S)	3)							
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Request for one-month extension of time (small entity) 60.00								

SUBMITTED BY						
Signature	1) Litables	Registration No. (Attorney/Agent)	24,603	Telephone	216-771-3800	
Name (Print/Type)	D. Peter Hochberg			Date	April 1, 2005	

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